

AC

**FILED**

JUN 17 2008

6-17-2008

MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

NE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Chief of Criminal Appeals  
 Attorney General's Office  
 100 West Randolph - 12th Floor  
 Chicago, IL 60601

08C3171

## 2. Article Number

(Transfer from service to)

7006 0100 0001 7313 4085

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

**RECEIVED**

ATTORNEY GENERAL

 Agent Addressee

B. Received by (Print Name) \_\_\_\_\_ Date of Delivery \_\_\_\_\_

D. Is delivery address under section 17?  Yes  
 If YES, enter delivery address below:  NoOFFICE SRVCS  
 MAILROOM

## 3. Service Type

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail                              |
| <input type="checkbox"/> Registered                | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail              | <input type="checkbox"/> C.O.D.                                    |

## 4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE


 First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

\* Sender: Please print your name, address, and ZIP+4 in this box \*

 United States District Court  
 219 South Dearborn Street  
 Chicago, IL 60604

 MICHAEL W. DOBBINS  
 CLERK, U.S. DISTRICT COURT

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**RECEIVED**